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CONFIRMATION NO. 6826

<b>SERIAL NUMBER</b> 10/799,916	<b>FILING OR 371(c) DATE</b> 03/11/2004 <b>RULE</b>	<b>CLASS</b> 015	<b>GROUP ART UNIT</b> 1744	<b>ATTORNEY DOCKET NO.</b> SHPR-01360USO
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/454,934 03/14/2003 and claims benefit of 60/518,756 11/10/2003  
 and claims benefit of 60/518,763 11/10/2003  
 and claims benefit of 60/526,868 12/04/2003  
 and claims benefit of 60/527,021 12/04/2003  
 and claims benefit of 60/526,805 12/04/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *NONE*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 05/29/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 28	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

**ADDRESS**  
29190

**TITLE**  
Robot vac with retractable power cord

<b>FILING FEE RECEIVED</b> 1044	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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